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CHAPTER 4

DRUG TRAINING AID ACCOUNTABILITY, STORAGE, SECURITY, AND HANDLING

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CHAPTER 4

DRUG TRAINING AID ACCOUNTABILITY, STORAGE, SECURITY, AND HANDLING

4-1. Drug Enforcement Administration (DEA)/Naval Criminal Investigative Service Regional Forensic Laboratory (NCISRFL) Registration. All MWD user commands within the continental United States (CONUS), Hawaii, Guam, and Puerto Rico are required to be registered with the DEA prior to requesting drug training aids. Commands outside the CONUS (OCONUS) will register only with NCISRFL.

a. DEA Registration. Each user command registered with the DEA will have one DEA registration number per command. The user command will be registered and authorized to have four controlled substances: Schedule I drugs, heroin (Code 9200); marijuana (Code 7360); hashish (marijuana resin (Code 7367)); and Schedule II drug, cocaine (Code 9041). Commands that have a documented need for methamphetamine will submit a request to the MWD program manager. Methamphetamine (Code 1105) is a Schedule II controlled substance. No other DEA codes will be used. The DEA forms will be prepared following DEA regulations dated 1 July 1973. The DEA regulations can be obtained from the DEA Registration Section, P.O. Box 28038, Central Station, Washington, DC 20038-8083. The DEA 222's will be safeguarded and kept under lock and key. A log book will be used to maintain accountability of the DEA 222's. Each DEA 222 has two numbers, an order number and a serial number. The order number will be logged on a single line entry and each transaction using a DEA 222 will be recorded.

b. Overseas Commands. Overseas commands not requiring DEA registration must register with the NCISRFL. The security officer/provost marshal makes the request, via the MWD program manager, and local chain of command, to the NCISRFL. The letter should include the country where the Drug Detector Dogs (DDDs) are located, the number of DDDs authorized, and the name and social security numbers of the primary and alternate drug training aid custodians. Both the primary and alternate drug training aid custodians must be U.S. military members. The letter should be updated as changes occur.

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4-2. Initial Procurement. Before proceeding with the initial procurement, secure storage facilities must be in place per paragraph 4-4.

a. DEA Registered Commands. Initial DEA registration is coordinated through the MWD program manager who will notify the NCISRFL when a command is ready to register with DEA. NCISRFL will forward a protocol letter to the appointed custodian with detailed instructions. The protocol letter and New Application for DEA Registration (DEA 225) will be sent to DEA. Upon receipt of a Controlled Substances Registration Certificate (DEA 223), the DEA 222 order form will be submitted to NCISRFL Norfolk via the MWD program manager for issuance of drug training aids.

b. Overseas Commands. User commands must submit a request to the MWD program manager, via local chain of command, for training aids. After approval is granted the training aids will be shipped.

c. The NCISRFL is the only authorized supplier of MWD drug training aids. The use of pseudo-narcotic training aids is prohibited except when specifically approved by the MWD program manager. All envelopes and packages mailed to the NCISRFL should be addressed as follows:

DIRECTOR
ATTN MWD SECTION
INVESTIGATIVE SERVICE REGIONAL FORENSIC LAB
9079 HAMPTON BLVD STE 110
NORFOLK VA 23505-1908

Telephone numbers for the NCISRFL are commercial 804-444-8615, DSN 564-8615; commercial fax 804-445-4272 or DSN 565-4272.

d. All training aids sent between NCISRFL and commands must be sent by registered mail.

e. The training aids will be issued in the form of pre-packaged, sealed and numbered kits. All commands with DDD teams will receive one standard drug training aid kit (figure 4-1). If MWD assets increase requiring additional training aids, the

requesting command must submit appropriate documentation to NCISRFL via the MWD program manager (figure 4-2). If a team is lost to a command precluding the requirement for or reduction in the number of aids, a request for disposition will be sent via message or fax to NCISRFL.

f. Upon receipt of the required documentation NCISRFL will forward the authorized quantity of aids to the designated custodians with a Construction/Receipt of Training Aids form (figure 4-3). Upon receipt of the aids, only the primary/alternate custodian will open the package. Affixed to the outer wrapper will be a checklist. The following procedures will be followed when opening the inner package:

(1) Examine the inner wrappers. If tampering is suspected, make a report to the local Naval Criminal Investigative Service Resident Agent (NCISRA) and proceed no further until directed. If the wrapping is intact, the package may be opened.

(2) Inventory the contents. Compare serial numbers on the Construction/Receipt of Training Aids form (OPNAV 5585/9) with serial numbers on aids. If there are any discrepancies, notify NCISRFL immediately.

(3) Weigh each container to verify the weight recorded on the Construction/Receipt of Training Aids form.

(4) Check aids into Drug Training Aid Daily Issue/Return log book and store aids appropriately.

(5) Sign bottom of Construction/Receipt of Training Aids form.

(6) Send one copy of signed Construction/Receipt of Training Aids form to the NCISRFL.

4-3. Drug Training Aid Accountability Folder. Primary training aid custodians are required to maintain an accountability folder to keep a record of all training aid transactions with NCISRFL.

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The Drug Training Aid Accountability Folder will be maintained in the following order:

a. DEA 223. A full size copy of the registration will be placed on the outside of the drug safe.

b. DEA 225/225a.

c. Primary Custodian appointment letter.

d. Alternate Custodian appointment letter.

e. Authorized to handle drug training aid list.

f. Construction/Receipt of Training Aids form.

g. Recall letters for training aids returned to NCISRFL.

h. Semiannual inventories/change of custodian letters and inventory.

i. DEA 222 copy 1 (brown).

j. DEA 222 copy 3 (blue).

4-4. Storage Requirements. Security of the training aids is of primary importance. To ensure proper security and handling of training aids, the following procedures will be followed:

a. The training aids must be stored in a GSA-approved security container, such as NSN 7110-00-920-9320 (four-drawer) or NSN 7110-00-920-9310 (two-drawer). The following storage procedures are required to minimize odor contamination:

(1) When two-drawer safes are used, marijuana and hashish should be stored in the top with the heroin and cocaine in the bottom.

(2) With four-drawer safes, the aids should be stored from top to bottom as follows: marijuana, hashish, cocaine, and heroin.

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(3) Commands with methamphetamine training aids will, if possible, obtain a five-drawer safe, e.g., Mosler, NSN 7110-00-919-9193, and aids will be stored from top to bottom as follows: marijuana, hashish, cocaine, heroin, and methamphetamine. If a four-drawer safe is used the aids should be stored from top to bottom: marijuana and hashish (together, in the top drawer), cocaine, heroin and methamphetamine. If a two-drawer safe is used the marijuana and hashish should be stored in the top drawer, the cocaine, heroin, and methamphetamine in the lower.

b. Safes weighing less than 750 pounds must be secured to the wall or floor.

c. Safes must be located in an area that is manned on a 24-hour basis or protected by an intrusion detection system.

d. Do not store training aids within the kennel facility.

e. Training aids will be stored in separate containers in the safe. Ammunition cans are ideal for this purpose, and recommended for use. The following procedures will be employed prior to using ammunition cans for storage:

(1) Storage cans should be cleaned with mild soap/warm water solution followed by rinsing with alcohol. This removes any ammunition residual odor.

(2) Storage cans will then be air dried.

(3) The storage cans will not be painted or marked with any material that could cause an odor contamination.

(4) A paper tag should be affixed to the storage cans identifying them as a marijuana, hashish, cocaine, heroin, or methamphetamine containers.

4-5. Handling Requirements. Training aids will be under positive control at all times. Personnel authorized to use drug training aids will be trained on the protection requirements for controlled substances.

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a. The primary and alternate drug training aid custodians must be designated in writing by the security officer/provost marshal. The primary custodian will maintain a daily issue/return log to record daily transactions involving the drug training aids. This log should be kept in a bound log book, such as, NSN 7530-00-286-8363, or equivalent.

b. The custodian will ensure that all training aids are returned to the storage site by the end of the tour of duty. The training aids must be returned by the recipient.

c. Overnight storage of the training aids away from the central storage site is prohibited. On rare occasions when the handler is serving on temporary additional duty (TAD), and the training aids are required to maintain MWD proficiency, the permission of the security officer/provost marshal must be obtained. Record the authorization to possess drug training aids, specific types, quantities and training aid numbers on the handler's TAD orders. Drug training aids may be sent via registered mail to the TAD destination. All storage requirements must be adhered to, both in transit and at the TAD site. If travel to the destination will be interrupted, coordinate in advance with the nearest military installation or civilian police agency to secure training aids. Use a chain of custody document or hand receipt to record the chain of custody.

d. The daily issue/return log will be prepared in the following manner:

(1) The left hand side of the book will contain check-out entries and the right hand side check-in entries. The columns will be as follows: Date; Time; Type of Aid (i.e., MJ, HE, CO, HA); Serial Number (the serial number can be found on the lead wire seal affixed to the drug training aid); Net Quantity (the net quantity of the drug training aid can be found on the receipt document, e.g., marijuana (20 gms), hashish (1 gm), cocaine (3 gms); Actual Weight Out (all drug training aids will be weighed upon issue/return); Signature of Custodian; Printed Name of Recipient; and Signature of Recipient.

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(2) Upon return of drug training aids, the following columns will be used: Date; Time; Type of Aid; Serial Number; Net Quantity; Actual Weight In; Signature of Recipient; Printed Name Of Custodian; Signature of Custodian; and Remarks. The remarks column will be used to make any entries involving the drug training aids, e.g., aid dented, leaking, damaged, or seal broken.

e. Extreme care will be used when handling drug training aids to prevent any cross substance or foreign matter contamination, i.e., plastic bags will not be used to transport drug training aids; glue, masking or scotch tape, labels or any other foreign matter will not be placed on, in or near the drug training aids. A scribe may be used to etch size, substance/serial on the metal can. Under no circumstances is an ink marker or pen to be used on any training aid. The drug training aids have a lead wire seal with a serial number and are sealed by the NCISRFL. Under no circumstances will training aids be opened. Aid integrity must be maintained at all times. Disposable clear plastic food service handlers gloves will be used when handling drug training aids to prevent human odor contamination and any absorption through the skin.

f. Upon completion of training, all training aids except marijuana will be wiped lightly with denatured alcohol and placed back into their storage cans. Drug training aids will be visually checked for physical signs of tampering or leakage each time they are checked out or checked in.

4-6. Damaged Training Aids. It is recognized that training aids used daily in training scenarios will sometimes become damaged or leak. These aids must be returned to the NCISRFL for evaluation. If a lead seal is broken the training aid must be returned to the laboratory.

a. If a drug training aid is found to be leaking or damaged, the following procedures will be followed:

(1) Separate the leaking aids from the other aids.

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(2) Send a message or a fax to the NCISRFL with info copies to the appropriate chain of command. The message should include the type, weight, and serial number of the training aid, the circumstances of the situation, and the telephone numbers, both commercial and DSN for the command. Do not forward an aid to the NCISRFL until permission has been obtained.

(3) Upon receiving disposition authority from NCISRFL, CONUS commands will complete the enclosed DEA 222 (copies 1 and 2) and the Training Aid Examination/Disposition Request (Figure 4-5). OCONUS commands need only fill out the Training Aid Examination/Disposition Request.

(a) Complete Training Aid Examination/Disposition Request and DEA forms, if applicable.

(b) Send aids via registered mail to NCISRFL.

(c) File copy 1 (brown) of DEA 222 in Drug Training Aid Accountability folder and send copy 2 (green) to DEA Division Office, if applicable.

(d) Log returned training aids out to NCISRFL in daily issue/return log.

b. To receive a replacement training aid, the following procedures will be followed:

(1) CONUS commands will fill out a DEA 222. Refer to instructions on the back of the blue copy.

(a) Send copies 1 and 2 to NCISRFL for replacement training aid.

(b) File copy 3 (blue) of DEA 222 in Drug Training Aid Accountability folder.

(c) Send copy of DEA 225/225a, custodian appointment letter, and power of attorney, i.e., the current custodian has changed since issuance of last registration to NCISRFL along with request for training aids.

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(2) OCONUS commands will complete a REQUEST FOR REPLACEMENT TRAINING AIDS form (figure 4-5). Include copy of custodian's appointment letter with request for training aids.

(3) NCISRFL will send a replacement aid via registered mail.

(a) When new training aids are received, log in as described in paragraphs 4-2f(1) through 4-2f(6).

(b) Return signed copy of Construction/Receipt of Training Aids form to NCISRFL.

4-7. Inventories. To ensure accountability of training aids, periodic inventories and reviews must be completed.

a. Semi-annual Inventory. Drug training aids/DEA 222s will be inventoried semi-annually and upon change of primary/alternate custodian. All training aids will be inventoried and total weight verified by a disinterested party, appointed by the security officer/provost marshal, using a calibrated scale. The disinterested party must be an individual senior in grade to the primary custodian, E-7/GS-9 or above. The disinterested party, upon completion of the drug/DEA 222 form inventory, will make an entry across both pages of the Drug Training Aid Daily Issue/Return log book and the DEA 222 form accountability log book that an inventory was conducted on a particular date and time and discrepancies were/were not noted. The entry will be signed, with name, rank and title under the signature. The disinterested party will send a letter to the security officer/provost marshal stating that a semi-annual inventory was conducted on a particular date and time. The disinterested party will list all drug training aids by serial number, type, weight, quantity and actual weight and all DEA 222 forms, by order form number on the inventory and will sign the original copy. The original will be forwarded to the security officer/provost marshal and a copy will be given to the drug custodian for the accountability folder. Any lost aids/aids suspected of being tampered with must be reported immediately to the nearest NCISRA for investigation.

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b. Tolerances. Although the training aids are packaged to prevent loss of their contents it is recognized that there will be a slight variation in weight due to handling and the conditions under which the aids are used. The following tolerances have been established as a guideline to be used in weighing training aids for daily issue and periodic inventories. Training aid weights that exceed these values should be returned to the laboratory for analysis and replacement.

	<u>Size of Training Aid</u>	<u>Tolerance</u>
Marijuana	20 grams	2.0 grams
	10 grams	1.0 grams
	5 grams	0.5 grams
	3 grams	0.2 grams
Hashish	All sizes	0.5 grams
Heroin	All sizes	0.2 grams
Cocaine	All sizes	0.2 grams
Methamphetamine	All sizes	0.2 grams

Even if the weight of a training aid is within these tolerances, but appears to be leaking, it must be returned to the laboratory for verification/destruction. If the custodian notices a gradual loss in weight for a particular training aid, he/she should not wait until the maximum tolerance has been reached before turning in the training aid. If the custodian, any individual involved in an inventory, or any individual using the training aid has any reason to believe that a training aid has been tampered with, the appropriate chain of command and the laboratory must be notified immediately.

4-8. Revalidation of Training Aids (Recall). Routine revalidation of training aids will be accomplished at 2-year intervals unless otherwise directed or required. Revalidation will be initiated in writing by the NCISRFL in the form of a recall package.

a. The recall package will consist of a recall letter, a list of training aids for recall, a Sample Training Aid

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Revalidation form and a blank Training Aid Revalidation form (OPNAV 5585/11) (figure 4-10).

(1) DEA-registered commands will receive a DEA 222 from the NCISRFL for return of the training aids.

(2) OCONUS commands will receive a Request for Replacement Training Aids (figure 4-6).

b. Any movement of drug training aids between a custodian and the NCISRFL must be accomplished via registered mail or hand delivery. The NCISRFL will mail the sending command a copy of the fully endorsed Training Aid Revalidation form. This copy will serve as the record of receipt.

c. Upon receipt of new drug training aids at the user site, follow initial procurement procedures outlined in paragraphs 4-2f(1) through 4-2f(6).

4-9. Change of Primary Custodian. The following procedures will be followed whenever the primary drug training aid custodian is relieved/transferred:

a. If the primary custodian is scheduled to leave the command he/she should have a legal officer prepare a power of attorney for DEA Order Forms (figure 4-7), authorizing someone else in the command to execute DEA 222s until such time as a new registration certificate is received. It is unnecessary to apply for a new registration certificate at the time of the primary custodian's leaving. When a renewal application is received, the newly authorized primary custodian should sign it.

(1) The power of attorney should be filed in the Drug Training Aid Accountability Folder behind the primary custodian's appointment letter.

(2) A copy of the Transfer of MWD Team DEA Registrant form (figure 4-8), should also be filled out and the registrant who is leaving should keep a copy for his/her personal record.

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b. OCONUS Commands. OCONUS commands changing custodians need only complete a Transfer of MWD Team Training Aid Custodian form (figure 4-9). The original should be placed in the Drug Training Aid Accountability Folder behind the primary custodian's appointment letter. The registrant who is leaving should keep a copy for his/her personal record.

4-10. Alternate Custodians/DEA Forms. Alternate custodians who are authorized to receive/send training aids to NCISRFL must have a power of attorney for DEA Order Forms, signed by the primary custodian. The power of attorney for DEA Order Forms should be filed in the Drug Training Aid Accountability Folder behind the alternate custodian's appointment letter.

Any questions regarding manufacture, distribution, or destruction of drug training aids should be directed to NCISRFL-Norfolk.

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DRUG TRAINING AID SETS

Substance	Size	Number	Total # of TA's	Total grams
Marijuana	20 grams	4		
	10 grams	2		
	5 grams	2		
	3 grams	2		
			10	116
Hashish	10 grams	1		
	5 grams	1		
	3 grams	1		
	1 gram	2		
			5	20
Heroin	5 grams	1		
	3 grams	1		
	2 grams	2		
	1 gram	2		
			6	14
Cocaine	5 grams	1		
	3 grams	2		
	2 grams	2		
	1 gram	2		
			7	17
Meth- amphetamine	5 grams	2		
	3 grams	2		
	2 grams	2		
			6	20

Figure 4-1

OPNAVINST 5585.2B

1007

SSIC
Date

From: _____

To: Director, Naval Criminal Investigative Service Regional
Forensic Laboratory, Norfolk

Via: Director, Naval Criminal Investigative Service (Code 24F6)

Subj: INITIAL/SUPPLEMENTAL REQUEST FOR MILITARY WORKING DOG
DRUG TRAINING AIDS

Encl: (1) List of dog names and tattoo numbers
(2) DEA 222, Number _____
(3) DEA Application/Registration for Schedules I and II
(Use if initial order)

1. This activity is currently responsible for the training and periodic recertification of _____ drug detector dogs. These dogs are listed by name and tattoo number in enclosure (1). In order to fulfill this responsibility, the following training aids are required:

<u>TYPE</u>	<u>SIZE</u>	<u>NUMBER</u>	<u>TYPE</u>	<u>SIZE</u>	<u>NUMBER</u>
-------------	-------------	---------------	-------------	-------------	---------------

2. DEA 222 is attached as enclosure (2) (if required).

3. This request is (check one):

_____ initial order [attach enclosure (3)].

_____ a supplemental order.

4. Aids should be shipped via registered mail to _____
(provide a specific business address not a P.O. Box number. Also, show the name of the individual authorized to accept custody of the aids. Do not use titles such as "Commanding Officer", "Security Officer" or "Provost Marshal").

Signature

Printed Name

Figure 4-2

Enclosure (1)

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CONSTRUCTION/RECEIPT OF TRAINING AIDS				ORDER FORM NUMBER	
FROM: NCIS REGIONAL FORENSIC LABORATORY 9079 HAMPTON BLVD STE 110 NORFOLK VA 23505-1908			TO:		
TYPE OF SUBSTANCE <input type="checkbox"/> COCAINE <input type="checkbox"/> HASHISH <input type="checkbox"/> HEROIN <input type="checkbox"/> MARIJUANA <input type="checkbox"/> METHAMPHETAMINE					
GRAM SIZE	CONTROL NUMBER	GROSS WEIGHT	GRAM SIZE	CONTROL NUMBER	GROSS WEIGHT
PACKAGED BY		SIGNATURE		DATE	
REMARKS					
ACKNOWLEDGEMENT OF RECEIPT					
PRINTED NAME AND GRADE OR RATE		SIGNATURE		DATE RECEIVED	
COMPLETE NAME AND ADDRESS				TELEPHONE (DSN & COMM.)	

OPNAV 5585/9 (1/97)

Figure 4-3

11-2-85 0000

TRAINING AID EXAMINATION/DISPOSITION REQUEST

Complete one form for each training aid submitted. Seal each aid in a separate container; this container must provide a complete vapor seal. The individually sealed aids may then be combined in one single mailing package. Be sure the appropriate chain of custody blocks are properly completed.

Date: _____

From: _____

To: Director, Naval Criminal Investigative Service Regional Forensic Laboratory, Norfolk

Subj: RETURN OF DRUG TRAINING AIDS

1. The below described drug training aid is submitted for appropriate analysis/disposition.

SUBSTANCE TYPE (Check one):

☐ COCAINE ☐ HASHISH ☐ HEROIN ☐ MARIJUANA ☐ METHAMPHETAMINE

SERIAL NO.

DATE FIRST RECEIVED

HANDLER COMMENTS REGARDING THIS AID: _____

CHAIN OF CUSTODY

DATE & TIMERELEASED BYRECEIVED BYFOR LABORATORY USE ONLY

REPORT OF ANALYSIS

DATE: _____

Gross weight of aid at time of analysis:

Weight of substance at time of analysis: _____

Amount of substance used in analysis: _____; Amount remaining:

____ Qualitative finding: _____

Quantitative finding (if applicable): _____ percent.

Comments:

/S/ _____
 Printed Name of Examiner

Figure 4-5

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REQUEST FOR REPLACEMENT TRAINING AIDS

COMPLETE THIS FORM TO OBTAIN A REPLACEMENT TRAINING AID(S) FOR AN OLD OR DAMAGED AID OR AIDS RECALLED BY THE LABORATORY.

FROM:

TO: *DIRECTOR*
ATTN MWD SECTION
INVESTIGATIVE SERVICE REGIONAL FORENSIC LAB
9079 HAMPTON BLVD STE 110
NORFOLK VA 23505-1908

<u>TYPE OF AID</u>	<u>SIZE OF AID</u>	<u>NUMBER</u>
(MARIJUANA, HASHISH,		(TO BE FILLED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

 SIGNATURE OF AUTHORIZED REQUESTOR

 PRINTED NAME OF REQUESTER

 DATE OF REQUEST

Figure 4-6

140 2 5 1987

POWER OF ATTORNEY FOR DEA ORDER FORMS
SAMPLE

Name of Command as listed on DEA Registration (Name of registrant)

_____ (Address of registrant)

_____ (DEA registration number)

Person who signed most recent renewal
I, _____ of registration (DEA 225a), the undersigned, who is authorized to sign the current application for registration of the above-named registrant under the Controlled Substances Act or Controlled Substances Import and Export Act, have made, constituted, and appointed, and by these presents, do make, constitute, and appoint new person who will be authorized to sign DEA 222 forms, my true and lawful attorney for me in my name, place, and stead, to execute applications for books of official order forms and to sign such order forms in requisitions for Schedule I and II controlled substances, in accordance with Section 308 of the Controlled Substances Act (21 U.S.C. 828) and Part 305 of Title 21 of the Code of Federal Regulations. I hereby ratify and confirm all that said attorney shall lawfully do or cause to be done by virtue hereof.

signature of person who signed DEA 225a

I, newly authorized person, hereby affirm that I am the person named herein as attorney-in-fact and that the signature affixed hereto is my signature.

signature of newly authorized person

Witnesses:

1. _____

2. _____

Signed and dated on the _____ day of _____, 19____,
at _____.

**THIS POWER OF ATTORNEY EXPIRES ON THE DATE THE PRESENT DEA
REGISTRATION EXPIRES.**

*** Original of this document should be placed in command's files;
one (1) copy should be sent to the NCISRFL when ordering training
aids.

Figure 4-7

OPNAVINST 5585.2B
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TRANSFER OF MWD TEAM DEA REGISTRANT
SAMPLE

This is to confirm the termination, on (date) ,
of (old registrant) as the authorized DEA
registrant for (activity) . An inventory of those
Military Working Dog (MWD) controlled substance training aids
currently held by this facility and for which (old registrant)
was responsible, reveals no discrepancy in number and all aids appear
properly sealed.

By separately executed power of attorney, (old registrant) has
authorized (new registrant) to execute applications for
books of official order forms and to sign such order forms in
requisition for Schedule I and II controlled substances.

 (old registrant) is hereby relieved of responsibility
for the security of this activity's MWD training aids or controlled
substances procured by this activity from this date henceforth.

Signature (Commanding Officer)

Date

Figure 4-8

TRANSFER OF MWD TEAM TRAINING AID CUSTODIAN
SAMPLE

This is to confirm the termination, on (date) , of
 (former custodian) as the authorized Military
Working Dog Training Aid Custodian for (activity) .
An inventory of those Military Working Dog (MWD) controlled
substance training aids currently held by this facility and for
which (former custodian) was responsible, reveals no
discrepancy in number and all aids appear properly sealed.
 (former custodian) is hereby relieved of
responsibility for the security of this activity's MWD training aids
or controlled substances procured by this activity from this date
henceforth.

Signature (Commanding Officer)

Date

Figure 4-9

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TRAINING AID REVALIDATION
[RECALLS ONLY]

FROM: _____

DATE: _____

PHONE: _____
[COMMERCIAL]

[DSN]

[MWD CUSTODIAN USE ONLY] [***** LAB USE ONLY *****]

Serial No.	Type of Aid	Approx. Weight	Actual Weight	

CHAIN OF CUSTODY

Date/Time	Released By	Received